

Aberystwyth University

Development and Global Health: Institutions

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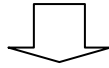
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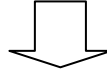
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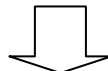
DEVELOPMENT INSTITUTIONS



AGREE: that poverty reduction/ eradication is the basis/ impetus for development; that economic development is key to poverty reduction (although disagree about why and how- see below)



DISAGREE: on the causes of poverty/ how to define it (relative or absolute); how to measure poverty; whether economic development comes before, or as a consequence of improvements in healthcare.



LEADS TO: several versions of the root problem (poverty) and subsequent underdevelopment, and several potential solutions (routes to development/ economics)-- this even appears to occur within institutions. Especially whether development/ health are top down or bottom up.

All of the institutions agree that the health MDGs are interrelated and need combined/ joint action. Health MDGs have also been criticised for **not explicitly addressing poverty in their targets.**

DFID

Development: 3W poverty puts UK at risk—threat to national security as poverty breeds **conflict**—which subsequently makes development impossible. **Addressing conflict will end poverty.** This binds development to defence and diplomacy as a strategy of national security to protect citizens at home. Much aid now being spent in conflict zones. Also need to focus on economic growth to reduce poverty.

Health: focus on MDGs—work to reach the goals set out. Esp MCH, Malaria. Not much to say about Health systems.

USAID

Development: poverty is a problem of defence and diplomacy. Development is about making America stronger/ more powerful in the world whilst improving lives of those less fortunate—it is critical to economic prospects of US and national security, and a moral imperative. Development focused on sustained economic growth and results. Aid should be a coherent strategy not charity.

Health: Strengthening health systems is priority no1. **THEN** the health MDGs. (see order of Global Health Initiative). PEPFAR.

WORLD BANK

Development: WB mantra ‘working for a world free of poverty’—economically defined as those who live on less than \$x per day which prevents them from being able to fulfil their basic needs. Poverty and underdev are economic problems.

Health: Primary emphasis on Health Systems Strengthening—achievement of MDGs will be a consequence of this. Effectively public health interventions. **In FY10 Bank invested \$580 million in communicable diseases & more than \$3bn in HSS.**

UNDP

Development: poverty is a relative concept, must be considered in the wider social context of underdevelopment. Poverty alleviation requires a holistic strategy of development. Development is a human right.

Health: Health MDGs. MCH outsourced to UNICEF—so UNDP tends to focus on HIV/AIDs as primary health issue.

Focus on MDGs & targets rather than systemic level.